



## **Qualitative Assessment of DSHS ScoreCard Goals And Perceptions of the Agency**

Prepared for:

**Washington State  
Department of Social and Health Services**

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## **EXECUTIVE SUMMARY**

### **Reason for the Research**

Washington State's Department of Social and Health Services (DSHS) has drafted goals for a "balanced scorecard" with which to evaluate itself. The agency would like to obtain feedback from its constituents, residents of the state who have not used the agency's services and those who have used some of the services, about the goals it has developed. The scorecard goals cover five areas of expectation:

1. Public value
2. Client service
3. Financial cost
4. Internal processes
5. Learning and growth

DSHS would like to check public and client reactions to the first three sets of goals. More specifically, the study was undertaken to explore how well the goals are understood, whether they are perceived as suitable for DSHS, and whether there are any other goals that should be included.

In addition, the agency is interested in understanding public awareness and perceptions of the agency and by what means impressions and information about the agency's work are acquired.

### **Methodology**

The Gilmore Research Group conducted a qualitative study consisting of six focus groups. The distribution of the groups covered Eastern and Western Washington as well as rural and more densely populated areas as listed below by date:

- 1 Western Washington rural Mt. Vernon April 25, 2000 at 6:00 pm
- 2 Western Washington city Seattle April 25, 2000 at 5:30 and 7:30 pm
- 1 Eastern Washington rural Prosser May 1, 2000 at 6:00 pm
- 2 Eastern Washington city Spokane May 2, 2000 at 5:30 and 7:30 pm

The urban sessions were held at Gilmore Research Group focus suites in Seattle and Consumer Opinion facilities in Spokane. In Mt. Vernon, the focus group was conducted in a room on the community college campus. In Prosser, the session was held in the Chamber of Commerce meeting room. All of the discussions were audiotaped, and all of the focus groups, except for the Mt. Vernon group, were videotaped as well.

The session began with first name introductions and some brief background information about respondents. The initial discussion explored respondents' awareness of DSHS and how they derived their perceptions of the agency. The second part of the discussion covered respondents' impressions of what services the agency provides, and later, reactions to a provided list of actual services. The third segment of the discussion delved in-depth into the three sets of goals for the scorecard. Public value goals were presented and discussed first, then customer (client and family) goals, and finally financial costs. The remainder of the discussion touched briefly on such issues as what portion of the state budget should be directed to social services and the pros and cons of having some of those services provided or supported by other organizations or groups. A copy of the complete discussion guide is included in the Appendix of this report.

Following completion of the groups, the audiotapes were transcribed. This report summarizes the findings and provides analysis of the findings along with our conclusions.

## **Sample Description**

A total of 56 Washington state residents participated in the focus groups. The gender distribution was relatively even with 27 males and 29 females. Their ages ranged from 21 to 78 years.

Criteria for participation in the focus groups was that the respondent be a resident of the state for at least a couple of years and not work for DSHS. A mix of age, income, education, and knowledge levels of DSHS was recruited.

In each group, there were from one to three retirees. One Boeing engineer participated. A former federal agent attended. In most groups, there was at least one teacher or school staff. There were a few students in the groups. Every group had at least one and often several homemakers. There were, at least, a couple of lawyers in the groups. One respondent was an auditor for the U.S. Treasury. One or two small business people participated in many of the groups. One human resources person attended the Mt. Vernon group. Some of the trades were represented such as an electrician and a welder.

## Summary and Conclusions

1. The majority of respondents were aware of DSHS, although many were not familiar with all of the services provided by the agency. On average, one person in each group was not very familiar with the agency. The public's knowledge and perceptions are derived from the media and through contact with the agency.
  - The public understands that the media pick up sensational stories and sometimes the facts are overblown.
  - They understand that the day-to-day things DSHS does—and does well—will not get into the news as fast as the more infrequent missteps.
  - Washington residents get some of their most vivid and long-lasting images of DSHS from direct contact with the agency, or from hearing about the experiences that family and friends have with the agency.
  - The personal experiences, direct or indirect, carry more weight than do media stories of DSHS.
2. Perceptions of DSHS were not overwhelming negative or positive, and many respondents expressed both types of impressions of the services that the agency provides.
  - Mount Vernon respondents seemed slightly more negative, in part due to concerns about the “fancy facilities” that the agency occupies in that area.
  - Seattleites appeared to lean more toward the positive side of the scale with many good things to say about DSHS.
  - Prosser had a balance of positive and negative attitudes toward the agency.
  - Spokane had the largest number of recipients of the services. Overall, the groups seemed slightly more negative than Seattle's groups, although the negatives appeared to be stronger among the non-users.
3. On the positive side, residents of the state were appreciative of the fact that DSHS is there to help people in need for various reasons.
  - They feel that the intentions of the agency are good and the services are necessary.
  - Quite a few would excuse the agency for any downfalls, because they believe DSHS may have more responsibilities than it can handle effectively with the resources available.
  - Some respondents praised the social workers as very caring and dedicated.
4. On the negative side, there are many concerns about the size of the agency and the fact that bureaucracy often bogs down the process of the providing services effectively and efficiently. Some specific concerns include...
  - Paperwork that can be intimidating or prohibitive

- Slow determination of service eligibility
  - Conflicting information about services
  - Overworked staff that may become short-fused
  - Mismanagement due to overlap and inefficiencies
  - Abuse and misuse of the system by clients
  - Self perpetuation motive for employees
5. The public knows about many of the services that DSHS provides—particularly “welfare,” placement of foster children, care of abused and neglected persons, and programs for the disabled and mentally challenged.
- Welfare was believed to include monthly support, food stamps, medical coupons and, in some instances, support for child care.
  - Many thought of the child oriented services including protection of abused children, licensing for foster homes, and certification for adoptions.
  - Safe havens for women who had been abused were mentioned.
  - A number of respondents were aware that DSHS cares for the disabled or developmentally delayed, often because a relative had received this benefit.
6. The respondents were often surprised at the breadth of services that DSHS provides. Some that had not been top-of-mind were recognized when a list of provided services was presented.
- Services for the elderly were not always recalled.
  - The wide variety of licensing and certification programs was a surprise to a number of respondents.
  - Many had not thought about care of incarcerated juveniles as one of the DSHS responsibilities but thought it made sense once they saw that function listed.
  - Drug and alcohol programs were less well known. Several groups suggested that there should be more drug and alcohol services provided.
7. The majority of respondents want DSHS to be hard on people who abuse the system and, at the same time, be approachable and understanding of those who really need help.
- They recognize that this is a difficult balancing act for the agency.
  - There is a dichotomous image that it takes time and experience for a client to “learn the ropes” and navigate the system. However, as soon as they do, it may be that they have been around too long and may be taking advantage of the system.
8. DSHS actions are both the agency’s best friend and worst enemy. The individual contacts had the most positive effects on public opinion when they were good and the most negative when the contact was unpleasant or unsatisfactory. One

recommendation was that DSHS remember the word “service” as part of the agency’s name.

### Public Value Goals

9. Most of the Public Value Goals that DSHS has identified were well accepted by the public and seen as appropriate.
  - The one exception is Public Safety, which is not immediately understood to be a natural goal for DSHS. This seemed like a goal for the police as much as for DSHS.
  - Some of the goals were viewed as too broad to be meaningful.
10. Other Public Value Goals were suggested:
  - Respondents thought that there should be one or two goals about education, one that pertained to training clients to better cope with life and another that made the public aware of all of the agency’s services, who qualified, and how to access them.
  - A number of respondents recommended the goal of having more proactive programs to prevent situations which require services and benefits. For instance, a program to promote “family well-being” was mentioned.

### Customer Goals

11. Most of the Customer Goals developed by DSHS were well accepted by the public.
  - The three goals regarding “high quality,” “easy to access and timely,” and “diverse population” were perceived as so general that they might apply to any agency or organization. Their lack of specificity made them lack meaning for some respondents.
  - Most important in the eyes of focus group respondents was the goal of treating clients with courtesy and respect. Some would add compassion to the list as well.
  - The timeliness of services was considered important, but respondents would want to know more about what was meant by “timely.” Some thought of timeliness in getting appointments, others in getting responses or funding in a timely manner, and others about how long one has to wait in line. The timeframe for each of these situations would be different and, thus, difficult to include in the goal.
  - The goal of clients experiencing stability was the most confusing in this category. Quite of few thought stability referred to consistency of service. Others thought the word stability did not make much sense in this context.

## Financial Cost/Goals

12. The public also accepts the Financial Goals developed by DSHS.

- Accountability was important to respondents, but most did not see how DSHS would be accountable to the public unless it was through a third-party, “watch-dog” group. “Wise use” was perceived as too subjective a term to be credible in this goal that says, “DSHS accounts for the wise use of public dollars.”
- Maximizing funding had both negative and positive interpretations. Some thought that the agency should secure funds to help the state. Others thought the agency might be obtaining as much funding as possible for its own self-perpetuation.
- In that light, the goal of reducing future costs to society was seen as essentially good although it should be more explicit about how the agency would accomplish that. One thought was that it would reduce operating costs and another was that it would take steps to diminish the need for welfare in the long term.

13. Other goals suggested in the financial arena had to do with eliminating waste, abuse and mismanagement as well as rewarding productivity and efficiency. Respondents want DSHS to be “good steward” of the public money.

## Wrap Up

14. Most believed that our society needs a DSHS because families no longer provide for their members, churches require that recipients adhere to the faith, and private sector is not adequately stepping up to the plate.

- Nonetheless, many believed that these other entities should be encouraged to do more for the low income, disabled, and elderly, so that the burden does not always fall on the public.
- Citizens agree that social and health services are necessary in our society. They understand that someone/some agency needs to be there for people in need.

Respondents also understand that many DSHS employees are dedicated to their jobs and care about the people they serve.

## DETAILED FINDINGS

### Awareness and Perceptions of DSHS

When focus group participants were asked to write down their perceptions of DSHS prior to any discussion, there were two main categories of responses. Some wrote attributes and descriptors, while others could only relate to the agency in terms of the services that it offers.

Respondents used both positive and negative descriptors in relating their impressions of DSHS. Some of the more positive attributes mentioned were related to the people and the purpose of the agency.

- Helpful
- Caring, personal
- People are wonderful to work with, dedicated
- Wide scope of services, provide necessary services
- Well-intentioned, do their best with tough situations
- Trying to improve
- Taxes well used

Some of the negative attributes ascribed to DSHS had to do with the nature of the organization:

- Bureaucracy (1 each in 4 groups)
- Large, too big (1 each in 3 groups)
- Red tape
- Chaotic and uncoordinated
- Loose
- Mismanaged
- Overworked/overloaded caseworkers/understaffed (3-4 mentioned in one group, 2 in other groups)
- Not very responsive, slow
- Inhibiting, time-consuming
- Headache to work with/lots of paperwork (1 each in 2 groups)
- Abused system, milked
- Gone astray
- Have bad public relations
- Government money spent may be more than necessary

A number of respondents were willing to excuse the flaws they found in DSHS because they felt their services outweighed their means. As one respondent explained, “the DSHS scope is too wide for them to be really good at everything.”

Many respondents recognize that some of the same characteristics that make it difficult for needy people to receive services (e.g., paperwork) are intended to make the access to services more difficult for those who are abusing the system.

“It’s a real tough situation, because you have to balance between the people who abuse it and try to monitor them while not monitoring other people too much so they don’t want to take the service.” (Prosser Group)

The irony pointed out is that the abusers are usually those who can navigate through the obstacles whereas some potential clients may be daunted by the complexity of working through the system as the following quotations explain:

“I don’t know that much about it, to be honest with you—I just hear of abuses. It seems like the people, you know, that need help don’t get it, and the people that don’t really need the help get it.”

“I think it’s also that there are some people who know how to work that system, and—the person who comes in, who maybe had the need but doesn’t have a clue—they almost need an ombudsman...to walk you through this.”

Someone said that the social workers were unqualified and overworked. Others attributed their insufficiencies to the fact that social workers were overworked. The quotes below support those perceptions:

“They’re under that much pressure, either budget or understaffed, they tend to develop a siege mentality.”

“Some workers are excellent, just so caring and compassionate...(but others) the expressions on their faces...and they’re just so abrupt, like they feel they’re being abused, like they take it personal[ly], like they’re being milked or abused...They may have started out with the greatest intentions, but then they get into it after awhile and see the abuses...it’s a burnout position.”

“These people (clients) are a lot of them in real desperate needs and I think that wears on you (the staff).”

Because there is not enough time to spend with each client, they may not do their jobs as well as they could under optimal conditions. Another person added that the caseworkers that seem cynical or angry also may be suffering from overwork:

“My husband and I went in and ...she (DSHS person) was very abrupt and ...came across as angry...I’d say 50% of the time the workers come across as ‘You are just here to abuse the system.’ The other half are ‘What can we do? How can we help’”

Respondents in the Mt. Vernon area had some negative impressions of DSHS that were specific to their area. They perceived the agency as using government money frivolously because the DSHS building in their town was large and very nice looking. As one respondent commented, DSHS is using “prime real estate,” which might otherwise be commercial property contributing tax dollars to the community.

### **Awareness of Services**

When respondents were asked what they associate with DSHS, many residents of the state thought immediately of welfare and the various types of support DSHS provides to low-income residents and their families:

- Food stamps
- Medical coupons
- Daycare
- Medicaid

Another area that was relatively top of mind for many of the respondents was foster care for children who are taken out of their original homes. A number of respondents associated the agency with adoptions. Quite a few were aware of the agency’s involvement in protecting children or taking them out of abusive situations.

Some respondents perceived DSHS as helping different kinds of people including the following:

- Single mothers and their children
- Mentally ill or developmentally delayed children and adults
- Disabled persons.

Some residents participating in the focus group sessions said that the state would provide daycare to low-income families.

Relatively few mentioned the elderly, at least initially, in their comments about the populations served by DSHS. That aspect of the agency’s services seemed to be less well known. One person perceived the agency as favoring female single parents over male single parents.

A few misperceptions about the services offered by DSHS were prevalent:

- One was the relationship of WIC to DSHS. Most respondents who were aware of WIC perceived that it was an excellent program. They thought the program was administered by DSHS, although it is actually under the auspices of the Department of Health (DOH). This confusion may have arisen from the fact that

First Steps, which is a DSHS service through which the nurse visits home of babies and young children, is seen as a part of the WIC program.

Another misperception mentioned in several groups was that the state Basic Health Plan is under DSHS, although it is actually administered by a separate entity.

- Some respondents thought that DSHS is responsible for vaccinations for all levels of income (again that is DOH).

Many of the respondents in different groups did not seem to be aware of the agency's licensing function. Those who were aware of licensing may have thought of foster homes as the most likely example of what DSHS licenses. However, one respondent thought DSHS might license restaurants, another confusion with DOH.

### **Sources of Perceptions and Information**

A few of the respondents, about one in each group, indicated that they had little or no familiarity with DSHS or what the agency provides.

"I know that there are many dedicated people who work for the DSHS and that they provide many services, and obviously I don't know all those services."

Many of the respondents indicated that they knew something about DSHS either through reading the newspapers, watching the news, knowing someone who had received the services or working with the agency in some capacity on behalf of their clients:

"A lot of it comes back to what we have heard. And we've heard it from friends or people that have been on it [DSHS assistance] or the media and all that infiltrates our mind. And shoot the media, you know."

Those who relied on the news alone had mainly negative impressions of the agency from those stories. A few of the Seattleites recalled the ward of the state discovered on her husband's boat in a very degenerated state. At the same time, they realized that the media focuses on the sensational:

"We hear the exceptional cases, as the lady on the sailboat...so whenever they get PR, it is bad PR. And when it becomes bad PR on the front page, it becomes a political issue."

A few in Spokane referred to a child in foster care who was abused. A number of respondents mentioned the change in directorship of the agency, which had just come out in the news, and presumed that it might be related to some mismanagement issues.

A small percentage of the respondents were current clients. However, quite a few more had been clients in the past at some time. Many of the respondents who had never

received any services from DSHS had other family members who did. Many respondents' impressions of the agency and its services were based primarily on the experiences of those family members or friends and acquaintances that had received some benefits.

Among those respondents who had a relative or close associate who had received or still receives services from DSHS, there were both positive and negative feelings about the agency as the following comments illustrate:

“Both my mother and daughter have been involved with the system, as well as several friends, and I’ve seen how they jump through hoops and gotten nowhere...it was a way of forcing people not to get services because they weren’t able to comply with unreasonable demands.”

On the one hand, most were thankful for the help. On the other hand, the difficulties associated with staying “on the system” were considered a hassle and a drawback. For a few that had been taken off or denied services, there were definite negative opinions. The main obstacles mentioned were the amount of paperwork, the difficulty in getting appointments, and the specific decisions that did not seem equitable. Assessment or continuation of disability benefits was one of the issues on which many respondents seemed to disagree with the state agency’s decision. One Spokane woman had tried to help a disabled person but found that the DSHS unresponsive:

“But to me they (DSHS) have personally and completely removed the word service from the agenda...and it’s become very difficult to get appointments that produce anything, any trust or anything of value to the recipient. And I’m basing that on the fact that we have a renter who was injured, and he was on L&I and they put him over on DSHS, and he’s finally on Social Security. But until he got on the Social Security, there were many months that he didn’t get one penny for some stupid reason...He was hit over the head with a 2-by-4 and he lost part of his mental capacities, but they treated him like he was still the genius that he was before. And because of them, he lost his [support], because he wasn’t able to comprehend what they would tell him [about appointments a month away.]”

In each group, at least two respondents had formerly or currently received benefits or dealt with the agency as a client or as part of the family of a client. A number of the former clients were very appreciative of the fact that DSHS helped them through a “low period in life.” A few were dissatisfied with the ultimate outcome of the service. One disgruntled male respondent referred to the fact that the system favored the mother and refused to follow up on his concerns.

## Reactions to Actual Services List

Overall, respondents in each group were unaware of some of the services that DSHS provides. The following comment shows how the list of services shown to respondents heightened their awareness of DSHS services:

“It makes me think that they have a lot more to do than I thought they did, and I already thought they had a lot to do.”

In one group, respondents were surprised that DSHS aids elderly people if they are low income, abused or neglected. In the Spokane group, some thought that older people in need of services might be too proud to request them.

A number of respondents were surprised that DSHS assists with drug and alcohol treatment for clients. To the extent that they understood that DSHS subsidizes drug and alcohol treatment, the respondents thought the agency was not providing enough. They noted that it only seemed to serve a small percentage of the state residents who need treatment for drug and alcohol abuse.

A few of the Spokane group were surprised at the “emphasis on mental health.” One respondent said that he had “seen in the paper here recently, they’re shutting down community mental health because of budgetary concerns.” Another echoed that the news was true due to 695.

Respondents in a couple of groups seemed unaware that DSHS was responsible for juvenile incarceration. Others thought that would be consistent with juveniles being wards of the state.

## Response to Goals

### Public Value Goals:

*People are safe from abuse and neglect:* This seemed to the focus group participants to be a relatively reasonable goal and fitting for DSHS, although it was perceived as a little too all-encompassing by some.

*Clients who are able to work are employed:* Respondents were positive about this being a good goal but skeptical about whether it could be applied. They pointed out how difficult it is to make a person work when that person does not want to. Many of the residents had concerns about clients who abused the system by trying not to remain employed any longer than necessary before returning to the welfare system.

*A safety net is in place for people in need:* This goal, like the first, seemed ideal and suitable for DSHS to adopt. However, there were some who thought the agency should discriminate among potential clients about how they got to be in need:

“Okay, so defining ‘in need’ as not just that they got themselves into need by spending too much.” (Spokane Group)

The former clients were especially likely to agree with this goal of the DSHS. When one respondent asked what was meant by a safety net, another explained it as follows:

“I’d say you fall off the high wire, you need a net. And if you fall off because you’re sick or have a heart attack, it’s nice to have something to catch you and work you over a little bit, fix you up. And if you’re just hungry and fell over by starvation, it’s nice to have someone stuff food in your mouth and put your health back to normal, and I think there’s several ways a safety net, you know – insurance, food, a lot of ways to look at it. ‘Cause you want to be able to – a person wants to be able to, oh, make it through when things are tough. (Spokane Group)

*Clients maintain or improve their health:* Respondents perceived the DSHS involvement with medical coupons and Medicaid as examples of how the agency would carry out this goal. The agency’s services related to mental health were another example of how respondents thought DSHS might meet this goal.

*Clients maintain maximum independence:* Many of the respondents wanted to revise this goal because they viewed the agency’s job as trying to get clients to the point that they could maintain some level, rather than the maximum level, of independence. They recognized that this level would be different for various types of clients, depending on whether only temporary loss of a job and income was involved or whether the client was permanently disabled or mentally challenged.

In several groups, respondents suggested using the word “achieve” as an alternative to “maintain.” This approach was assumed to require work on the part of the client as well as the help of the agency. Some other variations were that clients “are taught to achieve and maintain” and “develop skills to maintain” independence. A few would borrow the word “self-sufficient” from the mission statement to substitute for “independence.”

*Services promote public safety:* This goal was confusing or seemed inappropriate to the majority of respondents. The major objection to this goal was that it was too broad. Some related it to police responsibility. A few related it to safety of the public from people who may be housed by DSHS in group homes and other facilities of this type. One or two recalled the young man recovering from drug addiction or mental instability who killed a girl babysitting in the neighborhood.

In one or two of the group discussions, respondents focused on wondering how the agency would measure itself against these goals. These respondents thought the goals would have to be more specific in order to be measurable. Another comment related by someone in several of the groups was that the order implied a ranking of importance, and in that light, might need to be rearranged.

There were a number of suggestions about other public value goals to add to this list.

- Several groups recommended that services to educate clients should be a goal. Some respondents suggested that DSHS teach life skills to help its clients become better able to function and, thus, more independent.
- Participants in several groups thought that DSHS should educate the public about what services are available and how to obtain those services: for example, as mentioned in the following comment:

“I’m thinking back on...what we thought it (DSHS) was, and a lot of us...did not know. We weren’t educated enough to really understand the system. A public value goal? What about listing how to educate the public on how to teach others what they offer...maybe we could help people out as well.”

- A few of the additional goals recommended had to do with what DSHS would have to do to improve its image among the public. One was to “reverse negative connotations of DSHS.” Another goal recommended was to get people in and out of the system quickly; within two years was a suggestion for the regular low-income cases. As a corollary goal to weaning people off the system, someone suggested: “Services will not become a solution to all your problems.”
- A few other goals were put forth that were general in nature. One was to promote family well-being, which seemed to be the proactive version of what the agency does in protecting abused or neglected mothers, children, and elderly people. Another was to “build self-respect among clients.”

#### Customer (Client and Family) Goals:

*Services are high quality:* This goal was seen as an assumed goal, but somewhat of a cliché since most organizations state this as a goal. The respondents would like to see more specificity before they would find this goal credible.

*Services are easy to access and timely:* This was considered an important goal for DSHS in its intent. However, the vagueness of those attributes bothered a number of respondents. They did not see how DSHS could be easy to access if a client had to take a bus to the next town to get to the DSHS offices. Timely was interpreted to mean that the responses to needs were met within a reasonable time frame to be helpful.

*Services meet the needs of a diverse population:* This seemed appropriate for the DSHS, although different participants had some thoughts about this topic. One person thought that the agency served mainly minorities more than it does the mainstream low-income people. Another person thought the statement could and should address all different segments of the population including military personnel.

*Information about services is clear and available:* While this goal was not perceived as very likely to be reached, most thought it was straightforward and befitting DSHS. One respondent thought this goal should be moved to the top of the list. Another suggested that web access to information would make it more available.

*People are treated courteously and with respect:* This goal was seen as most important. Some suggested that it be moved to a top ranking position among the goals. An additional suggestion was treat clients “with compassion.”

*People participate in choices about their services:* This goal seemed somewhat unrealistic to a number of respondents who felt that some clients may either be unable to make rational choices or that they would ask for more than they needed if they had the opportunity to participate in choices.

*Clients experience stability:* This statement seemed to be the most problematic of the client goals. A few thought that most people using DSHS services were by definition somewhat less than stable. Many of those who tried to explain the meaning of the goal referred to it as “consistency of service.” This would imply that recipients would not have to fear that their benefits would be cut off at the whim of a case worker or even the system’s computer. Others thought it might mean stability of the caseworker, so that the client would not have to re-explain his situation on every visit to a DSHS office. The comments below illustrate negative client feelings about seeing so many different workers in the agency:

“It’s...intimidation...I mean you’re throwing your soul onto the bureaucracy here.”

“You’re...calling and getting 50 different people...telling your story 16 times.”

Some suggestions for additional goals with regard to clients were...

- Caseworkers will listen to people
- Services will be discrete and confidentiality maintained
- DSHS will provide a forum for complaints

In addition, because these goals protect the clients, respondents suggested that they should be distributed to new clients so they know what to expect. Measurement of performance on these goals was important to some respondents as well:

“If I were one of their clients, I might want to get one of those (lists of goals) in the initial entry...I would like to see a random sampling of clients...every year...and see who and where and which department is actually meeting these goals.”

“I think that it would be really nice for the clients to know the customer goals, to know that they’re trying to treat you with courtesy and respect.”

Another recommendation was to post the list of DSHS client related goals behind the desks of the caseworkers, so that clients and staff alike would remain acutely aware of them.

#### Financial Costs Goals:

The financial goals, in general, brought out a lot of concerns about how the government spends the taxpayers’ money. In addition, the issue of abuse of the system by clients was an influence on how respondents reacted to these goals. Many respondents in various groups voiced the concern that the system perpetuates itself, both among the clients and in the attitude of the management, as the following comments attest:

“There’s job security in providing as much assistance as possible...when my job is dictated by helping mass people, there is more in it for me to try to continue people in this system.”

“I have a friend who told me...you can get anything you want from the state as long as you know how to work the system.”

*DSHS accounts for the wise use of public dollars:* This goal raised questions among respondents:

- To whom is DSHS accountable other than the state legislature and the governor?
- Who defines “wise use” of the money?

Some pointed out the budget information is accessible because it’s a matter of public record. However, respondents thought that it would take a lot of effort for the public to look up or understand much of the DSHS financial information. The real concern is that the money is being used for clients who legitimately need it and for caregivers who are actually taking care of the disabled adult or foster child who is the beneficiary.

*DSHS maximizes federal and other funding sources:* Maximizing was the word in this goal that caused some contention. Some felt that it was the agency’s job to get as much funding from the federal government as it could. However, others felt that the agency should try to scale back and not spend any more than necessary. Many respondents were familiar enough with the budgeting process to know that the agency would have to spend all of this year’s funds, wisely or unwisely, in order to obtain as much funding the next

year. This idea correlated with the notion that management would want to maximize funds to keep their own positions and the jobs of their employees.

There was not a good alternative to the word “maximize” suggested, but “maintains” may be somewhat less aggressive. However, if the word maximize suggests making the most efficient use of the funds, then it would be acceptable. A few of the respondents understood that meaning of the goal.

*DSHS services reduce future costs to society:* This was seen as the most positive goal of the three. However, some respondents thought the goal might be stated more specifically that DSHS would “reduce operating costs” to lighten the burden on society in the future. Other groups believed that the agency would have to take proactive steps, especially training, to reduce the need for assistance among the general population before future costs to society could be lowered. Many respondents thought that people should be weaned from the system after two to three years:

“When you continually give a monthly check to somebody who’s using it to snort cocaine or crack, and you continue to feed them and provide them housing, what incentive do they have to ever clean up their lives and become productive members of society.”

Respondents recommended other goals in the financial category.

- “Aggressively eliminate fraud, waste, and mismanagement” was one suggested goal that seemed more direct but focused on a negative image that some currently have of the agency.
- Put more positively, another group suggested the goal that “DSHS will reward good financial management, and invest for later use. This group thought there should be an incentive for those who do the right thing and help to cut budgets. Rewards suggested were more vacation or additional staff so that employees could do their jobs more effectively.

An example of perceived mismanagement was that the effort to direct clients to work and support themselves was often negated by the rules and regulations with regard to provision of support to those clients. An example is the need to be absent from work to meet the paperwork and appointment requirements of the agency:

“When I was working, I was trying to get some sort of child care paid for because I wasn’t getting any support...and I had to go in like once a week and fill out paperwork...It seemed like it was pretty mismanaged, and I thought, ‘If I didn’t work, I could sit here for three hours once a week.’”

Another comment with reference to “mismanagement” seemed related in that the respondent wanted to have DSHS institute policies which make it more effective in getting clients back on their own independent feet and, thus, less wasteful of resources:

“I still feel there’s a lot of mismanagement. And I don’t mean that as a criticism, I just mean it as if they really want to make a change, they need to really make a change.”

Many viewed the Score Card effort and the fact that DSHS was holding the focus groups as a sign that the agency was getting ready to make some positive changes. The goals were seen as a first step to DSHS turnaround. Measurement of progress toward meeting those goals would be another step. The public would like to know how these goals would be measured and then to see report on the agency’s progress. In terms of the focus groups, people were pleased to be asked their opinion and to be involved in the process:

“I was really glad to see that they’re [DSHS is] your client, because that means they’re trying to improve themselves. And I thought, ‘Yes, there is somewhere in that bureaucracy somebody who’s thinking right, that says we’ve got to straighten out the system.’”

If the public has such impressions, they will enhance the image of the agency.

### **Who Should Provide the Services to People in Need**

In general, focus group respondents felt that the services that DSHS provides are a necessity because our society does not provide for its own very well without assistance from the government. It was pointed out that in some other cultures, the family might take responsibility for the destitute, disabled, abused and otherwise needy. However, that was not believed to be possible for people in the lower income brackets of our country. In addition, the family structure was believed to be weaker than in some other cultures or societies. People thought of churches and private industry as other sources of services and support for those in need. However, most thought that these entities might be selective in whom they served and would not cover everyone equally:

“The government’s role in it to me is completely pivotal, even if (churches and non-profits) are stepping in...in theory, it (the government) is for everyone.”

“I think it’s nice that the government comes in and takes a big chunk of the responsibility.”

Because DSHS is a government agency, it is associated with the same pros and cons as many other government agencies, such as bureaucracy. The following comments sum up the stance that many respondents took toward the agency:

“A necessary agency but [it] has extremes as do most governmental agencies.”

“I think the organization’s well intentioned. It’s providing necessary services, and I guess it’s a sign of the times, but it seems like it’s gone a little astray and it gets abused a lot.”

Overall, respondents seemed to think that the work DSHS does is important but that due to the breadth of its services, it is difficult to manage all of the different areas of service.

## **APPENDIX**

Rev. 4/14/00

C00078

☐ Group 1: Mt Vernon----- 4/25 @6:00PM

1 Recruit 12 for 10 to show

☐ Group 2: Seattle----- 4/26 @ 5:30PM

2 Alternate

☐ Group 3: Seattle----- 4/26 @ 7:30PM

3 Uncommitted (Callback)\_\_\_\_\_

☐ Group 4: Prosser----- 5/1 @ 6:00PM

4 Save (Why)\_\_\_\_\_

☐ Group 5: Spokane-----5/2 @ 5:30PM

☐ Group 6: Spokane-----5/2 @ 7:30PM

## GILMORE RESEARCH GROUP – RESIDENT/VOTER GROUPS/DSHS IMAGE

### FOCUS GROUP SCREENER

Interviewer

Name\_\_\_\_\_Date\_\_\_\_\_ID#\_\_\_\_\_

Respondent's Name\_\_\_\_\_ Male/Female \_\_\_\_\_

Address\_\_\_\_\_

City/State/Zip\_\_\_\_\_

Phone

Day:\_\_\_\_\_Eve:\_\_\_\_\_

Group

Date/Time\_\_\_\_\_

Voting Record: \_\_\_\_\_(From Sample)

**CALL INTRO: (Ask for Name on List) ( IF NOT AVAILABLE, SCHEDULE A  
CALLBACK APPOINTMENT OR LEAVE A MESSAGE, AS NEEDED)**

Hello, this is \_\_\_\_\_ with \_\_\_\_\_, an independent opinion  
research firm. Today / tonight we are conducting a very brief study with people in your  
area regarding issues of interest in your area. Let me assure you that this study is being  
conducted for research purposes only, and that your opinion is important to us.

**IF NEEDED**

The purpose of our research study is to learn more about state residents' opinion of services provided by the state of Washington.

We are inviting some of the people we talk with to a focus group discussion in your area and would like to talk with you a few minutes about that.

1. First, let me just verify, do you live in the \_\_\_\_\_(Mt. Vernon)  
(Greater Seattle)(Eastside)(S. Snohomish) (Prosser) (Spokane) area?

Yes [CONTINUE]  
No [THANK & TERMINATE]

2. How long have you lived in the state of Washington ? \_\_\_\_\_  
KEEP TRACK OF THIS.

3A.I'm going to list a few of the state agencies that people may have heard of, but may or may not know very much about what they do. As I read each one, please tell me if you feel you know a little about the agency & what it does, you know some, or you know a lot about the agency and what it does. If you don't know anything about it, you can say that too. PLEASE CHECK ONE RESPONSE FOR EACH AGENCY

	<u>Nothing</u>	<u>A Little</u>	<u>Some</u>	<u>A Lot</u>
Labor & Industry, or L & I	( )	( )	( )	( )
Dept. of Natural Resources, also known as DNR	( )	( )	( )	( )
Office of Financial Mgmt, or OFM	( )	( )	( )	( )
Dept. of Social and Health Services, also known as DSHS	<div>( )</div> <div>↓</div>	<div>( )</div> <div>↓</div>	<div>( )</div> <div>↓</div>	<div>( )</div> <div>↓</div>
	NO MORE THAN 2	CONTINUE		NO MORE
THAN 3				

3B. Do you, or anyone in your household work for any of these four agencies? No ( )

IF YES, RECORD:\_\_\_\_\_ IF DSHS, THANK AND TERM.

4. Next is a short list of state services. Please tell me if you are currently—or if you have

ever used any of these services in the state of Washington? . (Note: IF PERSON DOESN'T KNOW WHAT THE SERVICE IS, ASSUME ANSWER IS "NO")

	<b><u>Yes</u></b> <b><u>Currently</u></b>	<b><u>Yes</u></b> <b><u>Previously</u></b>	<b><u>No</u></b> <b><u>Never</u></b>
Medical assistance or medical coupons?	( )	( )	( )
A disability grant?	( )	( )	( )
Food stamps?	( )	( )	( )



TAKE UP TO 5 PER

(NO MINIMUM QUOTA)

GROUP

5. What is your age?  
TERMINATE IF UNDER 18 YEARS OF AGE.

RECORD: \_\_\_\_\_

6. What was the highest level of education you completed? (RECRUIT A MIX)

High school or less	1
Some college/voc./tech	2
4-year college degree	3
Some post graduate work	4
Ph.D., Masters, post grad. degree	5

7. And what is your total annual household income before taxes? Is it...READ 1 - 5  
(RECRUIT A MIX)

Under \$25,000	1
\$25,000 - \$49,000	2
\$50,000 - \$74,000	3
\$75+	4
DK/REF	9

8. GENDER RECORD: Male\_\_\_\_\_ Female\_\_\_\_\_

INVITATION
------------

As further part of our research, we are inviting people like you to participate in a focus group discussion regarding state agency services. These discussion groups are held for research purposes only. We'd just like to hear your honest opinions. The group will be relaxed and informal, and you will simply be involved in an exchange of ideas and opinions with 10 other people like yourself.

The discussion will be held at \_\_\_\_\_, located at \_\_\_\_\_. The group will take place on [CHECK MATRIX BELOW]. It will last approximately 2 hours, and at the conclusion of the discussion, we will be pleased to present you with a cash honorarium of \$40.00 in appreciation of your time. Will you be available to attend this discussion?

**GROUP 1**—Tuesday, April 24, 2000 at 5:30P.M. –(Mt. Vernon)

**GROUP 2**— Wednesday, April 25, 2000 5:30 (Seattle)

**GROUP 3**— Wednesday, April 25, 2000 at 7:30 (Seattle)

**GROUP 4** --- Monday, May 1, 2000 at 6:00 pm (Prosser)

**GROUP 5**— Tuesday, May 2, 2000 at 5:30 (Spokane)

**GROUP 6**— Tuesday, May 2, 2000 at 7:30 (Spokane)

1. Yes
2. No
3. DK

[CONTINUE]  
[THANK & TERMINATE]  
[SAVE AS UNCOMMITTED, GET

C/B

DATE AND TIME\_\_\_\_\_

All right, we'll be sending you a letter to confirm this invitation, along with a map to the facility. May I please have the correct spelling of your name and address [RECORD ON FRONT PAGE] ? (VERIFY PHONE NUMBER FROM SAMPLE)

For this project, it is very important that we are able to count on your attendance. **If, for any reason, you find yourself unable to join us, please call us at \_\_\_\_\_ as soon as possible. This will, hopefully, enable us to find a replacement for you.**

**Thanks again.**

## DISCUSSION OUTLINE

### **INTRODUCTION OF PROCEDURES, TOPIC AND EACH PARTICIPANT 15 MIN**

Thank you for agreeing to take part in this research project on state agency services. This is just one of six such groups that we are doing around the state over several weeks.

Before we begin I want to tell you that we are audio/videotaping this session. This is because I will be writing up the findings of all the groups and it is impossible for me to take enough notes to remember all the interesting and important things that are said across six groups. The tapes will be used for research purposes only. There will be no identifiers other than first names used on the tapes. In the final report, no names will be used and the findings of all the group discussions will be combined. We don't quote people, only ideas.

The information we gain here goes directly to my company, Gilmore Research Group, which is an independent research company. We will protect your identity and we guarantee that your name is not associated with any of the information you provide. You may refuse to answer any question and you don't need to bring up anything that you might be uncomfortable sharing with the other people here.

Your participation in this group will have no impact on any government services you may be receiving now or in the future. No one will know what you individually said tonight.

**IF MIRROR FACILITY:** You may also have noticed the mirror. There are several viewers on the other side of that mirror. They are people who are working with me on this project and are also interested in what we are learning in these group discussions. Having them in the room can be distracting, so that is why we hold these discussions in this type of facility where they can watch and listen without influencing the discussion.

**IF NON-MIRROR FACILITY:** You may also have noticed that several people are here in the room with us. These are people who are working with me on this project and are also interested in what we are learning in these group discussions. I have asked them to sit to the side so they can watch and listen, but they will not be part of the group discussion.

If, for any reason, you feel uncomfortable being taped or viewed and wish to exclude yourself from the group, you may do so.

**IF ANYONE VOICES CONCERN AND WISHES TO BE EXCUSED, TAKE THAT PERSON OUTSIDE ROOM, THEN PAY THE INCENTIVE FEE, THANK AND EXCUSE THE PERSON.**

**Great, let's get started. A final few ground rules are:**

- **We'll all try to be sure that everyone has an opportunity to express their opinions and just so that we are sure to hear, please speak up at same level as I am.**
- **Only one person speaking at a time.**
- No right or wrong answers, want your honest opinions and suggestions.
- Feel free to help yourselves to refreshments at any time.
- Please keep what is said in the group to the group

## OVERALL IMPRESSIONS

15 MIN

Write down your overall impression—the first thing comes to mind about DSHS

What did you write? Why?

How have you formed that opinion; where hear, read, etc?

IF ALL/MOST NEGATIVE OR NEUTRAL OPINION, PROBE: What positive or constructive things have you heard about DSHS?

Services

20 min

What do you think DSHS does? What are the specific services in the “services” part of the DSHS name? (List on easel)

Where have you heard about each?

What do you think DSHS should be doing—things not already on this list?

(Another easel list) Why do you say that?

HAND OUT ONE-PAGE OF ACTUAL DSHS SERVICES. These are the services that DSHS provides for Washington residents. Which of these are surprises to you? Why?

## DSHS GOALS

30 45

MIN

Next, I’m going to ask you to review a draft set of goals that the people within DSHS have developed. These people are serious about fulfilling the mission of the agency and providing good service to Washington residents. As part of this process, they are very interested in hearing the opinions of Washington residents

First, this is the mission of the Department of Social and Health Services. POST MISSION STATEMENT.

Now, here are the goals divided into three primary areas of expectations for the agency—expectations that the public has, expectations that the clients of DSHS have, and expectations that are related to financial responsibility. CHECK TO BE SURE THAT “CLIENTS” IS A TERM EVERYONE UNDERSTANDS. Take a moment to read through these.

Are there any of these that you don’t understand? If so, which ones and why?

Regardless of how good a job you feel DSHS is currently doing, do you feel these goals are compatible with what you understand the agency is or should be doing?  
If not, why not? Be specific—which one(s) are out of place and why?

Are there any goals for DSHS that you feel should be on this list and are not? What are they and why should they be here?

Is this type of information something you'd like to know about DSHS--what their goals are and how they work toward their goals? If so, where would you want to see that information? What would you be most likely to pay attention to?

## **HUMAN SERVICES AND GOVERNMENT**

**25 10 MIN**

Let's step back and be philosophical for a minute about roles and responsibilities of government in relation to human services.

(Easel List of Services) Look at the services DSHS currently administers.

**What percent of federal, state and local taxpayer dollars do you think SHOULD go to fund these sorts of human services – not each one specifically, but the entire list? Your taxpayer dollars also fund education, environmental activities, law enforcement, and transportation, and other activities of state and local governments.**

What do you think is the best type of organization or agency How can society best provide the social services it agrees are essential to maintain a humane environment to oversee and/or provide these various services? You can think of various levels of government— Federal, state, county or local—you can consider church or other religious organizations, charitable or not-for-profit groups, or even companies that provide services for a profit. Just let your imagination run and tell me who would either oversee or how these provide services could best be provided better than DSHS?

(Easel list of services and who should provide them better.)

Why do you feel that (this group)(these groups) would do better than DSHS with this should provide this service? What about this group wins your approval/confidence?

**FOR THOSE LEFT AS DSHS RESPONSIBILITIES:** Why do you feel that DSHS is the best organization deal with these particular services?

**FOR THOSE LISTED AS OTHER THAN A GOVERNMENT RESPONSIBILITY:**  
Why do you feel that someone other than government should be handling this service?  
How would DSHS have to change in order for you to trust them to oversee this service?

**MIN**

We've about run out of time here tonight, but I have two last questions: What, if anything, did you learn about DSHS tonight that you didn't know before, and has your opinion of the agency changed for the better, for the worse or not at all after this discussion?

## Public Value Goals \*

- People are safe from abuse and neglect.
- Clients who are able to work are employed.
- A safety net is in place for people in need.
- Clients maintain or improve their health.
- Clients maintain maximum independence.
- Services promote public safety.

\* This is what the general public expects DSHS to accomplish.

## **Customer (Client and Family) Goals \***

- Services are high quality.
- Services are easy to access and timely.
- Services meet the needs of a diverse population.
- Information about services is clear and available.
- People are treated courteously and with respect.
- People participate in choices about their services.
- Clients experience stability.

\* This is what our clients and their families expect of DSHS.

## **Financial Costs \***

- DSHS accounts for the wise use of public dollars.
- DSHS maximizes federal and other funding sources.
- DSHS services reduce future costs to society.

\*To be financially responsible, DSHS has these goals.